

STATE OF KANSAS
STATE CORPORATION COMMISSION
200 Colorado Derby Building
Wichita, Kansas 67202

WELL PLUGGING RECORD
K.A.R.-82-3-117

API NUMBER 15-185-22,746-0000

LEASE NAME MC CUNE

WELL NUMBER L-35

3630 Ft. from S Section Line

4950 Ft. from E Section Line

SEC. 35 TWP. 22S RGE. 12 (X) or (W)

COUNTY STAFFORD

Date Well Completed 12/18/90

Plugging Commenced 12/19/90

Plugging Completed 12/19/90

TYPE OR PRINT
NOTICE: Fill out completely
and return to Cons. Div.
office within 30 days.

LEASE OPERATOR JANDIE OIL COMPANY, INC.

ADDRESS RR; Hudson, KS 67545

PHONE# (316) 793-7288 OPERATORS LICENSE NO. 9163

Character of Well D & A

(Oil, Gas, D&A, SWD, Input, Water Supply Well)

The plugging proposal was approved on December 18, 1990 (date)

by Dodge City District office, Richard Lacey (KCC District Agent's Name).

Is ACO-1 filed? attached If not, Is well log attached? _____

Producing Formation none Depth to Top _____ Bottom T.D. 3745'

Show depth and thickness of all water, oil and gas formations.

OIL, GAS OR WATER RECORDS 12-28-90 CASING RECORD

Formation	Content	FILED FROM STATE CORPORATION COMMISSION DATE	TO DEPTH	Size	Put in	Pulled out
		<u>DEC 26 1990</u>		<u>8-5/8"</u>	<u>303'</u>	<u>none</u>

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same and depth placed, from feet to feet each set.

Well was plugged by Halliburton with a total of 125 sax of 60/40 Pozmix 6% gel as follows:

50 sax @ 620'; 40 sax @ 320'; 10 sax @ 40'; 15 sax in the rat hole;

10 sax in the water well Plugging completed 6:30 AM 12/19/90

(If additional description is necessary, use BACK of this form.)

Halliburton Oilwell Cementing, Inc.

Name of Plugging Contractor & Woodman-Iannitti Drilling Company License No. 5122

Address PO Box 308; Great Bend, KS 67530

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: JANDIE OIL COMPANY, INC.

STATE OF _____ COUNTY OF _____, ss.

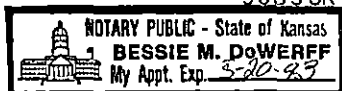
(Employee of Operator) or (Operator) of above-described well, being first duly sworn on oath, says: That I have knowledge of the facts, statements, and matters herein contained and the log of the above-described well as filed that the same are true and correct, so help me God.

(Signature) Freddie B. Walls

(Address) P.O. Box 1585

Great Bend, Kansas 67530

SUBSCRIBED AND SWORN TO before me this 27th day of November, 19 90



Bessie M. Dowerff
Notary Public

My Commission Expires: 5-20-93